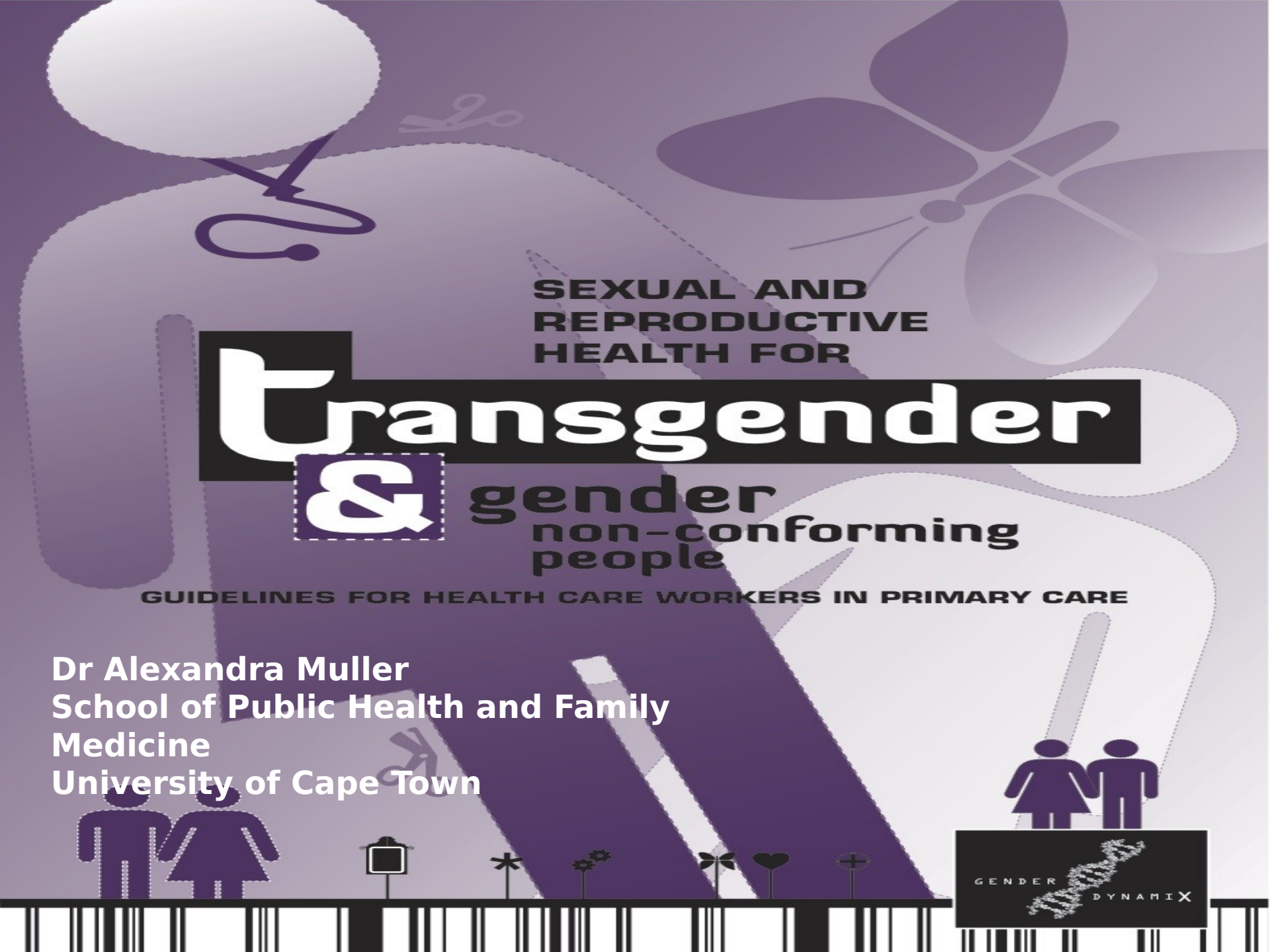

Dr Alexandra Muller
School of Public Health and Family Medicine
University of Cape Town

Outlook

- Why guidelines on transgender sexual and reproductive health for primary health care workers?
- Creating the guidelines
- Key sexual and reproductive health concerns for transgender and gender non-conforming people
- Strategies to distribute guidelines

Terminology

- Transgender
  - People who have a gender identify that is different from the one assigned to them at birth
- Gender non-conforming
  - People who express gender in ways that contravene what society expects from a man or a woman
  - Includes genderqueer people, cross-dressers, drag kings/ queens, transsexuals, people who are androgynous

Transgender patients: primary health care needs

- General primary health care, in non-judgmental and non-discriminatory context
- HIV services (VCT, ART provision, adherence support)
- Prevention and health promotion
  - Safer sex advice and materials
  - Advice on non-invasive gender-affirming practices
- Sexual and domestic violence
- Gender-affirming treatment: advice and management
  - Cross-gender hormone treatment
  - Surgical options

Transgender patients: health-seeking behaviour

- Stevens 2012: many transgender people experience discrimination and transphobia in sexual health services
- Transgender people expect discrimination at health facilities, and often do not seek treatment until absolutely necessary
- E.g. cross-gender hormone treatment: high levels of self-medication

The need for simple SA-specific guidelines

- NSP: transgender people are vulnerable population
- No national guidelines on transgender health
- A lot of transgender health concerns can be attended to at primary care level
- Yet, transgender health is not included in health professions education/ CPD courses
- NHI: re-engineering primary health care
- Primary health care workers need knowledge and skills to provide adequate quality care to transgender and gender non-conforming patients

Writing the guidelines

- Systematic literature review
  - Scientific articles
  - Policy documents
  - Existing guidelines
- Key stakeholder consultation
  - Focus group discussion with transgender people
- Peer review
  - SA and international scholars
- Final document, now in second edition

Content

- Transgender people in health care, legal framework
- Key skills for practitioners
- Infectious disease
- Mental health and substance use
- Prevention and health promotion
- Gender-affirming treatment
- Sexual and domestic violence
- Trans-affirming clinical environments

Transgender people in health care

- Many transgender and gender non-conforming people experience discrimination when accessing health services (Stevens 2012)
- Barriers to care
  - Discrimination and stigma
  - Lack of health care workers' knowledge about transgender health
  - Lack of transgender-specific prevention resources, e.g. safer sex barriers methods
- Urgent need for non-discriminatory and non-judgmental services

Legal framework

- Transgender people have a right to health care services
  - “Everybody has the right to have access to health care, including sexual and reproductive health care” (Section 27, SA constitution)
  - “The state may not unfairly discriminate against anyone on one or more grounds, including [..] gender, […] sexual orientation […]” (Section 9, SA constitution)

Legal framework

- Health care workers have an obligation to provide non-discriminatory services. They have to
  - At all times act in the best interest of the patient, respect patients' choices and dignity, and maintain the highest standards of personal conduct and integrity (National Health Professions Act, 1974)
  - Recognise the human rights of all individuals,
  - Treat all individuals in an impartial, fair and just manner, and
  - Ensure that their "personal beliefs do not prejudice their patients' health care" (Core ethical guidelines, HPCSA)

Key communication skills for transgender patients

- Don’t make assumptions
  - Ask for preferred pronouns
  - Use gender-neutral language when inquiring about significant others – use ‘partner’ instead of ‘husband’/ ‘wife’
  - Don’t make assumptions about lifestyle or personality
- Assure your patient of confidentiality
- Know about available support structures
- Help your patient to become aware of their rights

Key skills for physical examinations

- Some transgender patients may not be comfortable with their bodies, and physical examinations can be stressful or traumatic
- Always remember: physical exams are relevant to the anatomy present, not the patient's perceived or affirmed gender
- Always refer to your patient by their preferred gender

Physical examinations: examples

- Transgender woman: preferred gender female, (some) male anatomy
  - Do prostate exam
  - Always refer to patient as ‘she’, use chosen name
- Transgender men: preferred gender male, (some) female anatomy
  - Do breast tissue exam, exam of internal reproductive organs
  - Always refer to patient as ‘he’, use chosen name

Infectious disease

- Transgender people have higher HIV prevalence than general population (especially transgender women)
- Risk factors are contextual and behavioural
  - Higher rates of sexual violence and assault
  - Sex work
  - Sexual practices
- ART: potential interactions with concurrent hormone treatment
- Adherence: often additional stress due to social circumstances
  - Trans- / Homophobia
  - Stigma
  - Economic vulnerability

Infectious disease

SEXUAL PRACTICE	HIV AND STI RISK	PREVENTION METHODS
Penetrative sex (in anus or vagina)	High for HIV High for STIs	Use male condoms (penis) Use female condoms (vagina)
Oral sex	Medium-low for HIV Medium-low for STIs (herpes, gonorrhea, chlamydia)	Use condoms (for penises) Use dental dams, or non-microwaveable cling wrap (for vaginas)
Fingering and handjobs	Low for HIV Low for STIs	Wash hands, no cuts on hands, use gloves
Rimming (licking or sucking the anus)	Low for HIV High for some STIs	Wash area, use dental dams or non-microwaveable cling wrap *(NB: high risk for some STIs)*
Scissoring (rubbing genital areas against each other)	Low for HIV Low for STIs	Wear underwear Use non-microwaveable cling wrap
Fisting (insert whole hand into vagina or anus	Low for HIV Low for STIs Risk for injuries	Use gloves Use lubricant

Mental health and substance abuse

- Social contexts can have significant impact on transgender people's mental health
  - Social exclusion
    Stigma
  - Violence
- Transgender people have higher levels of
  - Depression
  - Anxiety disorders
  - Substance use

Health promotion and prevention

- Cancer
- HIV/ STIs
- Genital taping and tucking
- Binding

Gender-affirming treatment

- Cross-gender hormone treatment
  - Transgender people might seek advice, referrals or treatment
  - Primary care provider may initiate or manage CGHT

- Surgical treatment
  - Surgical treatment either in one of 3 specialised centres in SA or overseas
  - Primary care providers to do referral, pre- and post OP management

Sexual and domestic violence

- Transgender and gender non-conforming people are at higher risk of sexual and domestic violence
- Primary care providers need to
  - Know the provisions of the Sexual Offenses Act (2007)
  - Provide PEP
  - Provide counselling
  - Provide medico-legal services
  - Provide court evidence

Trans-affirming clinical environments

- “Simple” measures often go a long way!
- Avoid making assumptions
- Provide visibility and resources
- Educate other staff
- Stay up to date with international guidelines

Resources

- Guidelines available free of charge from Gender Dynamix
- ISBN-registered: ask your library to acquire it (if at academic institution)
- SA transgender health services
  - GSH
  - Baragwanath
- International transgender health services (websites)
  - WPATH
  - Centre of Excellence for Transgender Health (U of California)
  - Callen-Lorde Community Health Centre
  - Fenway Institute